POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

7 CFR				
hereby	appoint:			1
Practitioners associated with the Customer Number: OR		79990		
Prac	ctitioner(s) named below (if more than ten patent	practitioners are to be	named, then a customer nur	mber must be used):
	Name	Registration Number	Name	Registration Number
-				
-	, , , , ,			*
y and al	y(s) or agent(s) to represent the undersigned be Il patent applications assigned <u>only</u> to the unders o this form in accordance with 37 CFR 3.73(b).	igned according to the	USPTO assignment records	(USPTO) in connection with or assignment documents
_	ange the correspondence address for the application of the application of the address associated with Customer Number:	JAIL Alt	9990	5. 1. 5., 5(5) to.
OR				
Fin	m or ividual Name			
Fin				
Fin Ind Address		State		Zip
Find Ind Address Dity		State		Zip
Find Ind Address Dity Country	ividual Name	State	Email	Zip
Fin Ind Address City Country Telephoressignee R. Ba	ividual Name	State	Email	Zip
Fin Ind Address City Country Felephoresignee R. Ba Ba Cer Furray Felephoresignee Felephoresign	ne Name and Address: ard, Inc. tral Avenue	nder 37 CFR 3.73(t) ed. The statement pointed practition ower of Attorney i	p) (Form PTO/SB/96 or ex aunder 37 CFR 3.73(b) m is authorized to act or s to be filled.	quivalent) is required to b
City Country Telephor ssignee R. Ba 30 Cer furray	ne Name and Address: ard, inc. tral Avenue Hill, New Jersey 07974 of this form, together with a statement yeach application in which this form is us stitioners appointed in this form if the applit identify the application in which this P	nder 37 CFR 3.73(l ed. The statement pointed practitions were of Attorney	o) (Form PTO/SB/96 or equipper 37 CFR 3.73(b) more so to be filed.	quivalent) is required to b ay be completed by one behalf of the assignee,
Fin Ind Address City Country Felephoresignee . R. Ba 30 Cer lurray l copy celed in each prace and muse	Name and Address: ard, Inc. htral Avenue Hill, New Jersey 07974 of this form, together with a statement upon a point of the form is used application in which this form is the stitleners appointed in this form if the ap	nder 37 CFR 3.73(l ed. The statement pointed practitions were of Attorney	o) (Form PTO/SB/96 or equipper 37 CFR 3.73(b) more so to be filed.	quivalent) is required to b ay be completed by one behalf of the assignee,
City Country Felephoresignee . R. Ba 30 Cer lurray	Name and Address: ard, Inc. htral Avenue Hill, New Jersey 07974 of this form, together with a statement upon a point of the form is used application in which this form is the stitleners appointed in this form if the ap	nder 37 CFR 3.73(l ed. The statement pointed practitions were of Attorney	p) (Form PTO/SB/96 or ex- under 37 CFR 3.73(b) m or is authorized to act or s to be filed. "If Record authorized to act on behalf of Date	quivalent) is required to b ay be completed by one behalf of the assignee, of the assignee

This collection of information is required by 37 CFH. 1.31, 1.32 and 1.33. The information is required to consider the same and the consideration is required by the USPTO to process) an application. Confidentiality is governed by 38 CFL 22 and 37 CFR 1.1 and 1.14. This collection is estimated to take 5 minutes to complete, including pathering, preparing, and submitting the completed application from the USPTO. This walk vary depending upon the interface case. Any comments on the amount of time you require to complete this from and/or sugglestors for reducing his batch, whole the set to the Chief information Order. U.S. Patent and Trademark. Office. U.S. Department of Commence, P.O. Box 1450, Abexandria, VA 22313-1450. ON TO SHID FEES OR COMPLETED FORMS TO THAN ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Abexandria, VA 22313-1450.